	m 481 - Carrier Annual Reporting  Data Collection Form		PCC Form OM8 Cont July 2013	481 rol No. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	633200		
<015>	Study Area Name	PRTC - CENTRAL	and the second of the second o	Received & Inspected
<020>	Program Year	2015	ii.e.	
<030>	Contact Name: Person USAC should contact with questions about this data	Inabel Gonzalez	JM2_	JUL = 1 2014
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7877066580 ext.	10.00	FCC Mail Room
<039>	Contact Email Address: Email of the person identified in data line <030>	igonzale@claropr.co	om	
ANNUA	L REPORTING FOR ALL CARRIERS			54.313 54.422 Completion Required (check box when complete)
<100>	Service Quality Improvement Reporting		(complete attached worksheet)	18888
	Outage Reporting (voice)		(complete attached worksheet)	<b>/</b> /
<210> <300>	Unfulfilled Service Requests (voice) 356	outages to report		\ (1)\(\text{II}\)
<300>	633200pr310.pdf		2011 90-101	<u></u>
<310>	Detail on Attempts (voice)			√ ////////////////////////////////////
	ed	X9.2% - 100-	(attach	descriptive document)
<320>	Unfulfilled Service Requests (broadband)			1 Mills
<330>	Detail on Attempts (broadband)		(attaci	n descriptive document)
-400s	Number of Complete and 200			
<400> <410>	Number of Complaints per 1,000 customers (voice) Fixed 19.0			
<420>	Mobile 0.0			7 7
<430>	Number of Complaints per 1,000 customers (broadl	pand)		V 1888
<440> <450>	Fixed 45.0 Mobile 0.0			I the continue of the continue
<500>	Service Quality Standards & Consumer Protection R 633200pr510.pdf	ules Compliance	(check to indicate certification)	<b>✓ ✓</b>
<510>			(attached descriptive document	1 1
<600>	Functionality in Emergency Situations		(check to indicate certification)	1 1
	633200pr610.pdf	70 101 70 101 70 100		
			(attached descriptive document)	
<610>				N. Control
<700>	Company Price Offerings (voice)		(complete attached worksheet)	
<710>	Company Price Offerings (broadband)		(complete attached worksheet)	
<800>	Operating Companies and Affiliates Tribal Land Offerings (Y/N)?	114	(complete attached worksheet)	V 384411
	Tribal Land Offerings (Y/N)?  Voice Services Rate Comparability	10	yes, complete attached worksheet) (check to indicate certification)	
	633200pr1010.pdf		1	2 8
<1010>			(attach descriptive document)	1 MANAGE
<1100>	Terrestrial Backhaul (Y/N)?   O	0	f not, check to indicate certification)	
<1110>			(complete attached worksheet)	
<1200>	Terms and Condition for Lifeline Customers		(complete attached worksheet)	1111111 V
	Price Cap Carriers, Proceed to Price Cap Additional		MACONITORNA AND AND AND AND AND AND AND AND AND A	
<2000>	Including Rate-of-Return Carriers affiliated with Pr	ice Cap Local Exchange	e Carriers (check to indicate certification)	
<2005>	RANGETONA 2004 - CO 52 5 12 - 125 - 1250 - 1250 - 1250 - 1250 - 1250 - 1250 - 1250 - 1250 - 1250 - 1250 - 1250		(complete attached worksheet)	
<3000>	Rate of Return Carriers, Proceed to ROR Additional	Documentation Work	(check to indicate certification)	8 4 W W B F.
<3005>			(complete attached worksheet)	

List ABCDE

Page 1

	ervice Quality Improvement Reporting illection Form			FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	633200		
<015>	Study Area Name	PRTC-CEN	TRAL	
<020>	Program Year	2015		- 5 57 5-57 - 17 PETER PETER 0 00 00 00 00 00 00 00 00 00 00 00 00
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzal	ez JUR	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ex	t.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@clar	opr.com	
<110>	Has your company received its ETC certification from the FCC?	(yes /	(no) <b>O</b>	1
	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5		00	
<111>	year plan" filed with the FCC?	(yes /	(no) O O	
<112>	54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your of CETC which only receives frozen support, your progress report is only required to address voice telephony service.	company is a		
				Name of Attached Document
	Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	ne		
<113>	Maps detailing progress towards meeting plan targets			
<114>	Report how much universal service (USF) support was received			
<115>	How (USF) was used to improve service quality			
<116>	How (USF)was used to improve service coverage			¥
<117>	How (USF) was used to improve service capacity			
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.			<b>*</b>

(200) Service Outage Reporting (Voice)	FCC Form 481	
Data Collection Form	OMB Control No. 306	0-0986/OMB Control No. 3060-0819
	July 2013	

<010>	Study Area Code	633200
<015>	Study Area Name	PRTC - CENTRAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com

	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Did This Outage Affect Multiple		
1	Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventativ
ł						-	Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedure
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<b>加州中國共產黨</b>	ce Offerings including Voice Rate Data lection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-08  July 2013	193
<010>	Study Area Code	633200	
<015>	Study Area Name	PRTC-CENTRAL	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez JOA	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com	
<701> <702>	Residential Local Service Charge Effective Date  1/1/2014 Single State-wide Residential Local Service Charge		

361	cal>	<a2></a2>	≪a3>	<bl><bl>       <br <="" th=""/><th>Ø &lt;62&gt;</th><th><b3></b3></th><th>        </br></th><th><bs></bs><bs></bs>       <br< th=""><th><o></o></th></br<></th></bl></bl>	Ø <62>	<b3></b3>	    	<bs></bs> <bs></bs>       <br< th=""><th><o></o></th></br<>	<o></o>
	32707	51 50 YANGUNA			Residential Local	ent attention and note that		Mandatory Extended Area	
-	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fe
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fuly 2013
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<010>	Study Area Code	633200
<015>	Study Area Name	PRTC - CENTRAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Conzalez
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com

<a href="#">di&gt;</a>	<a2></a2>	45 Kb1%	        	(c) <c></c>	<d1>%</d1>	<d2></d2>	<d3></d3>	<d49< th=""></d49<>
State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken Wher Limit Reached (selec
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			- See attack worksheet -	Hed				
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(C. C. C	erating Companies ection Form				* 0	CC Form 481 MB Control No. 3060-0986/OMB Ily 2013	Control No., 3060-0819
<010>	Study Area Code		633200		47		
<015>	Study Area Name		PRTC-CE	NTRAL			
<020>	Program Year		2015				
<030>	Contact Name - Person	USAC should contact regarding this data	Inabel Gonzal	lez Jyr			
<035>		nber - Number of person identified in data line <030>	7877066580 ex	xt.		-1	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	igonzale@cla	ropr.com		STANDARD BALL BALL BALL	
<810>	Reporting Carrier	Puerto Rico Telephone Company, Inc.		22.45 A 218.45 M 111			
<811>	Holding Company	Telecomunicaciones de Puerto Rico, Inc.					
<812>	Operating Company						
<813>		cal>		<a2></a2>		2.	
		Affiliates		SAC	Doing Busin	ness As Company or Brand Desig	nation
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Study Area Code   S33200		bal Lands Reporting lection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-08  July 2013	119
Study Area Name	<010>	Study Area Code	633200	
Contact Name - Person USAC should contact regarding this data  Tabbel Contact Telephone Number - Number of person identified in data line <030>  787766680 ext.  Contact Telephone Number - Number of person identified in data line <030>  Tribal Land(s) on which ETC Serves   Tribal Land(s) on which ETC Serves  Tribal Government Engagement Obligation  Name of Attached Document  If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to \$54.313(a)(9) includes:  Select (Yes, No, NA)  Select (Yes, No, NA)  Select (Yes, No, NA)  Select (Yes, No, NA)  Compliance with Rights of way processes	<015>		PRTC-CENTRAL	
Contact Telephone Number - Number of person identified in data line <a href="Color: Name of Attached Document">Color: Name of Attached Document</a> Fribal Land(s) on which ETC Serves  Tribal Government Engagement Obligation  Name of Attached Document  If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to \$54.313(a)(9) includes:  (921) Needs assessment and deployment planning with a focus on Tribal community anchor institutions.  (922) Feasibility and sustainability planning: (923) Marketing services in a culturally sensitive manner; (924) Compliance with Rights of way processes	<020>	Program Year	2015	
Contact Email Address - Email Address of person identified in data line <a href="https://doi.org/10.1007/j.com/">doi.org/10.1007/j.com/</a> Contact Email Address - Email Address of person identified in data line <a href="https://doi.org/10.1007/j.com/">doi.org/10.1007/j.com/</a> Pribal Land(s) on which ETC Serves  Tribal Government Engagement Obligation  Name of Attached Document  Name of Attached Document  If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to \$54.313(a)(9) includes:  (Yes,No, NA)  Na)  Neds assessment and deployment planning with a focus on Tribal community anchor institutions.  (921) Needs assessment and deployment planning with a focus on Tribal community anchor institutions.  (922) Feasibility and sustainability planning:  (923) Marketing services in a culturally sensitive manner;  (924) Compliance with Rights of way processes	<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez	
<920> Tribal Government Engagement Obligation Name of Attached Document If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to 5 54.313(a)(9) includes: <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning; <923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes	<035>	Contact Telephone Number - Number of person identified in data line <030	0> 7877066580 ext.	
<920> Tribal Government Engagement Obligation Name of Attached Document If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to \$54.313(a)(9) includes: <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. <922> Feasibility and sustainability planning; <923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes	<039>	Contact Email Address - Email Address of person identified in data line <03	0> igonzale@claropr.com	
If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:	<910>	Tribal Land(s) on which ETC Serves		
to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to  § 54.313(a)(9) includes:  Needs assessment and deployment planning with a focus on Tribal community anchor institutions.  Select (Yes,No, NA)  Parallel Select (Yes,No, NA)  Select (Yes,No, NA)  Select (Yes,No, NA)  Select (Yes,No, NA)  Community anchor institutions.  Select (Yes,No, NA)  Select (Yes,No, NA)  Select (Yes,No, NA)  Community anchor institutions.	<920>	Tribal Government Engagement Obligation	Name of Attached Document	_ //
community anchor institutions.  <922> Feasibility and sustainability planning; <923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes	to confi demons § 54.31	rm the status described on the attached document(s), on line 920, strates coordination with the Tribal government pursuant to (3(a)(9) includes:	(Yes,No,	
<922> Feasibility and sustainability planning; <923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes	<921>			
<923> Marketing services in a culturally sensitive manner; <924> Compliance with Rights of way processes	<922>			
<924> Compliance with Rights of way processes				
The state of the s		The stable of the grant of the control of the stable of th		
	<925>	Compliance with Land Use permitting requirements		

<926> Compliance with Facilities Siting rules

<928>

<927> Compliance with Environmental Review processes

Compliance with Cultural Preservation review processes <929> Compliance with Tribal Business and Licensing requirements.

479	o Terrestrial Backhaul Reporting lection Form	FCC Form OMB Cont July 2013	trol No. 3060-0986/OMB Control No. 3060-08:
<010>	Study Area Code	633200	
<015>	Study Area Name	PRTC - CENTRAL	
<020>	Program Year	2015	
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com	5199
:1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)		
1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)		

feline	ection Form		2 4		FCC Form 481 OMB Control No. 3060-098 July 2013	6/OMB Control No. 3060-0819
<010>	Study Area Code		633200			
<015>	Study Area Name		PRTC-CENTRAL	<b>L</b>		
<020>	Program Year		2015		3,000	
<030>	Contact Name - Person USAC should contact regarding this data		Inabel Gonzalez	esse		
<035>	Contact Telephone Number - Number of person identified in data lin	e <030>	7877066580 ext.	_W=V=- V10		
<039>	Contact Email Address - Email Address of person identified in data lin	ne <030>	igonzale@claropr.	com		
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	. 6	33200pr1210.pdf			
					Name of Attached Document	
:1220>	Link to Public Website	НТТР				-
r the we	neck these boxes below to confirm that the attached document(s), on line 12 bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:	10,		v		
1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<b>V</b>				
1222>	Details on the number of minutes provided as part of the plan,	<b>V</b>				
1223>	Additional charges for toll calls, and rates for each such plan.	<b></b>				

Data Col	rice Cap Carrier Additional Documentation		FCC Form 481 QMB Control No. 306 July 2013	0-0986/OM8 Control No. 3060-0819
including	Rate of Return Carriers offiliated with Price Cap Local Exchange Carriers		30072033	
<010>	Study Area Code	633200		
<015>	Study Area Name	PRTC-CENTRAL		
<020>	Program Year	2015		
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez		La grand de la constant de la consta
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com	ww	
CHECK t	he boxes below to note compliance as a recipient of Incremental Connect Amer support as set forth in 47 CFR § 54.313(b),(c),(d),(	맛이 그 아이들이 맛이 그렇게 하는 것이 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그		nd Connect America Phase II
	Incremental Connect America Phase I reporting			
<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)}			
<2011>				
<2012> <2013> <2014> <2015>	Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)} 2013 Frozen Support Certification 2014 Frozen Support Certification 2015 Frozen Support Certification 2016 and future Frozen Support Certification			
	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}			
<2016>	Certification Support Used to Build Broadband			
	Connect America Phase II Reporting (47 CFR § 54.313(e))		V	
<2017>	3rd year Broadband Service Certification			
<2018>	5th year Broadband Service Certification			
<2019>	Interim Progress Certification			
<2020>	Please check the box to confirm that the attached document(s), on pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support addresses of community anchor institutions to which began providing preceding calendar year.	shall provide the number, names, and		
<2021>	Interim Progress Community Anchor Institutions	Name of A	.ttached Document Listing Required Information	

1	ste Of Return Carrier Additional Documentation	FCCForm481
Data Col	ection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	And Andrew Company of the Company of	July 2013
<010>	Study Area Code	533300
<015>	Study Area Name	PRTC - CENTRAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez
<035>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	7877066580 ext.
<0392	Contact Email Address - Email Address or person identified in data line <030>	igonzale@claropr.com
CHECK t		nt to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 in information reported on this form and in the documents attached below is accurate.
240324		
(3010)	Progress Report on 5 Year Plan Milestone Certification (47 CFR § 54.313(f)(1)(i))	
	massare continuous (4) of the 3-4-325(1/2)(1))	Name of Attached Document Listing Required Information
	### 1 10 1 17 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	
(3011)	Please check this box to confirm that the attached document(s), on line 3 § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addre providing access to broadband service in the preceding calendar year.	012 contains the required information pursuant to ssses of community anchor institutions to which began
1,422,000		
(3012)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))	
		Name of Attached Document Listing Required Information
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No)
	If yes, does your company file the RUS annual report	(Yes/No)
Places	check these haves to confirm that the attached document(s), on line 2017	7, contains the required information pursuant to § 54.313(f)(2) compliance requires:
(3015)		, contains the required information pursuant to § 34.313(1)(2) compliance requires.
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Cas	sh Flows
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	
		Name of Attached Document Listing Required Information
(3018)	If the response is no on line 3014, Is your company audited?	(Yes/No) IOIO
201 B	If the response is yes on line 3018, please check the boxes below to	مهداههد
	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a fo	ormat comparable to RUS Operating Report for Telecommunications
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(3021)	Management letter issued by the independent certified public accountant that p	performed the company's financial audit.
	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
(3022)	Copy of their financial statement which has been subject to review by an	
· money.	independent certified public accountant; or 2) a financial report in a	
	format comparable to RUS Operating Report for Telecommunications	
	Borrowers,	
(3023)	Underlying information subjected to a review by an independent certified	<b>=</b>
(3024)	public accountant Underlying information subjected to an officer certification.	<b>├</b> ─-
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Ca	sh Flows
620000000000000000000000000000000000000	F	
(3026)	Attach the worksheet listing required information	1
	I	
	L	
		Name of Attached Document Listing Required Information

424749 5602 5810453	tion - Reporting Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	633200
<015>	Study Area Name	PRTC - CENTRAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez WR
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

l certify that I am an officer of the reporting carrier; my responsibilitie reciplents; and, to the best of my knowledge, the information reporte	es include ensuring the accuracy of the annual reporting requirements for universal service and on this form and in any attachments is accurate.
Name of Reporting Carrier: PRTC - CENTRAL	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/30/
Printed name of Authorized Officer: JUAN ZARPAN	2. Grant
Title or position of Authorized Officer: CONTROLLER - SOB DIRECTOR	A CONTRACTOR OF THE PROPERTY O
Telephone number of Authorized Officer: 7877926052	////
Study Area Code of Reporting Carrier: 633200	Filing Due Date for this form: 07/01/2014

Data Coll	ion - Agent / Carner ection Form	FCCForm 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	633200
<015>	Study Area Name	PRTC-CENTRAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com

## TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	ls authorized to submit the information reported on behalf of the reporting carrier
also certify that I am an officer of the reporting carrier; my agent; and, to the best of my knowledge, the reports and	responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ata provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

## TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	Authorized to File Annual Reports for CAF or LI Recipient	s on Behalf of Reporting Carrier
[[]	orized to submit the annual reports for universal service support re eporting carrier; and, to the best of my knowledge, the information	[4] [4] [4] [4] [4] [4] [4] [4] [4] [4]
Name of Reporting Carrier:		£
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Title or position of Authorized Agent or Employee of Agent		
Felephone number of Authorized Agent or Employee of Age	ent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

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FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	633200
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<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com

<701> Residential Local Service Charge Effective Date
<702> Single State-wide Residential Local Service Charge

1/1/2014

<703>

<81>	<a2></a2>	<a3></a3>	<b1></b1>	<b2> -</b2>	<bs></bs> <bs></bs>       <br< th=""><th>&lt;04&gt;</th><th></th><th><b>←</b></th></br<>	<04>		<b>←</b>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
PR	PRTC		FR	23.05	0.0	0.12	0.0	23.17
PR	PRTC		FR	21.05	0.0	0.11	0.0	21.16
PR	PRTC		FR	19.35	0.0	0.1	0.0	19.45
PR	PRTC		FR	17.35	0.0	0.09	0.0	17.44
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						10-10-10-10-10-10-1		

## (710) Broadband Price Offerings Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	633200
<015>	Study Area Name	PRTC - CENTRAL
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Inabel Gonzalez
<035>	Contact Telephone Number - Number of person identified in data line <030>	7877066580 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	igonzale@claropr.com

	<a2> Exchange (ILEC)</a2>	Residential	State Regulated	Total Rates	Broadband Service -	Broadband Service	Usage Allowance	
State	exchange (rece)	Rate	Fees	and Fees	Download Speed (Mbps)	-Upload Speed (Mbps)	(GB)	Action Taken When Limit Reached (select)
PR	PRTC	19.99	0.1	20.09	512.0	512.0	0.0	Other, Unlimited Usage
PR	PRTC	19.99	0.1	20.09	1.0	512.0	0.0	Other, Unlimited Usage
PR	PRTC	24.95	0.12	25.07	2.0	512.0	0.0	Other, Unlimited Usage
PR	PRTC	35.99	0.18	36.17	3.0	512.0	0.0	Other, Unlimited Usage
PR	PRTC	39.95	0.2	40.15	4.0	1.0	0.0	Other, Unlimited Usage
PR	PRTC	59.95	0.3	60.25	5.0	512.0	0.0	Other, Unlimited Usage
PR	PRTC	84.95	0.42	85.37	5.0	1.0	0.0	Other, Unlimited Usage
PR	PRTC	95.0	0.48	95.48	8.0	1.0	0.0	Other, Unlimited Usage
PR	PRTC	99.0	0.5	99.5	10.0	1.0	0.0	Other, Unlimited Usage
PR	PRTC	119.0	0.6	119.6	16.0	1.0	0.0	Other, Unlimited Usage
PR	PRTC	129.0	0.65	129.65	20.0	3.0	0.0	Other, Unlimited Usage
PR	PRTC	139.0	0.7	139.7	30.0	3.0	0.0	Other, Unlimited Usage
PR	PRTC	149.0	0.75	149.75	50.0	4.0	0.0	Other, Unlimited Usage
		1		<del></del>				
							Total Internal	

<010>	Study Area Code		633200
<015>	Study Area Name		PRTC-CENTRAL
<020>	Program Year		2015
<030>	Contact Name - Person	USAC should contact regarding this data	Inabel Gonzalez
<035>	Contact Telephone Nur	nber - Number of person identified in data line <030>	7877066580 ext.
<039>	Contact Email Address	Email Address of person identified in data line <030>	igonzale@claropr.com
<810>	Reporting Carrier	Puerto Rico Telephone Company, Inc.	
<811>	Holding Company	Telecomunicaciones de Puerto Rico, Inc.	
<812>	Operating Company		

	<b>41&gt;</b>	<b>₹</b> ∂2>	<b>33</b> >
Af	filiates	SAC	Doing Business As Company or Brand Designation
Tracfone Wireless		633009	Tracfone
7 77 77			
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